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PATENT  
ATTORNEY DOCKET NO. 01996/005001

Certificate of Mailing: Date of Deposit: December 29, 2004

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Janet D'Annunzio-Ellis

Printed name of person mailing correspondence

Janet D'Annunzio-Ellis  
Signature of person mailing correspondence

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	James P. Koch	Art Unit:	3764
Serial No.:	09/400,817	Examiner:	Michael A. Brown
Filed:	September 22, 1999	Customer No.:	21559
Title:	CUSTOM MOLDED CERVICAL CAP AND METHOD AND KIT FOR FORMING SAME		

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STATUS INQUIRY

Applicants hereby inquire as to the status of the above-captioned application. A Revocation and New Power of Attorney that was filed on August 31, 2004 (along with a Reply to Final Office Action and Notice of Appeal, which were acted upon, resulting in a subsequent Notice of Allowance), and a Change of Correspondence Address was filed on October 27, 2004 in response to the Notice of Allowance being mailed to the incorrect address. Copies of these documents are provided herewith.

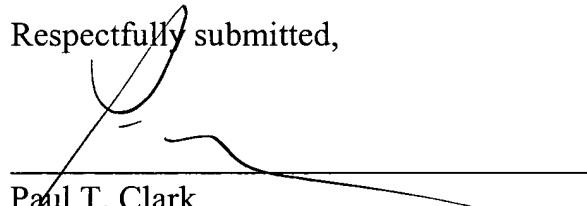
Applicants have not received an acknowledgement that the Revocation and New Power of Attorney was received and entered, nor have Applicants been able to access the application via private PAIR. Accordingly, Applicants respectfully request acknowledgement that the Revocation and New Power of Attorney was entered. Applicants also request association of this application with Customer No. 21559.

If there are any charges or any credits, please apply them to Deposit Account No. 03-2095.

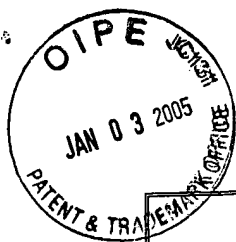
Date:

Aug. 29, 2004

Respectfully submitted,

  
\_\_\_\_\_  
Paul T. Clark  
Reg. No. 30,162

Clark & Elbing LLP  
101 Federal Street  
Boston, MA 02110  
Telephone: 617-428-0200  
Facsimile: 617-428-7045



**PATENT**  
**ATTORNEY DOCKET NO. 01996/005001**

Certificate of Mailing: Date of Deposit: August 31, 2004

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Janet D'Annunzio-Ellis  
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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant:	James P. Koch	Art Unit:	3764
Serial No.:	09/400,817	Examiner:	Michael A. Brown
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Alexandria, VA 22313-1450

**REVOCATION AND NEW POWER OF ATTORNEY**

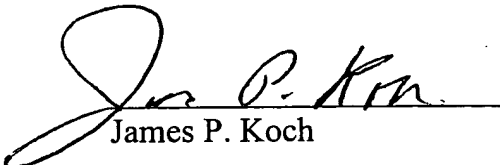
I, an inventor named in the above-captioned application, which is unassigned, hereby revoke all powers of attorney previously granted in the application and appoint the attorneys and/or agents associated with customer number **21559** with full power of substitution and revocation, to prosecute the application and to transact all business in the United States Patent and Trademark Office connected therewith.

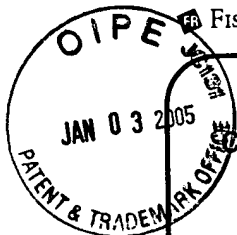
All correspondence regarding the application should be sent to the address associated with customer number **21559**.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Respectfully submitted,

Date: August 10, 2004

  
James P. Koch



<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>  Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/400,817
	Filing Date	September 22, 1999
	First Named Inventor	James P. Koch
	Group Art Unit	3764
	Examiner Name	Michael Gregory Brown
	Attorney Docket Number	01996-005001

Please change the Correspondence Address for the above-identified application to:

☐ Customer Number:

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I am the :

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest.  
Certificate under 37 CFR 3.73(b) is enclosed.

☒ Attorney or agent of record. Registration Number 33,524

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number 33,524

Typed or Printed  
Name

Celia H. Leber

Signature

Date

October 27, 2004

Telephone (617) 542-5070

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

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Date of Deposit: October 27, 2004

Signature: Darlene J. Morin

Typed Name of Person Signing Certificate: Darlene J. Morin